

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/942606
520.40551X00

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	<i>10</i>	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<i>8</i>	<i>minus 20 =</i>
INDEPENDENT CLAIMS	<i>5</i>	<i>minus 3 =</i>
MULTIPLE DEPENDENT CLAIM PRESENT	<input checked="" type="checkbox"/>	

* If the difference in column 1 is less than zero, enter "0" in column 2

1-26-05 II CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			---	=
Total	<i>14</i>	Minus	<i>-- 20</i>	<i>=</i>
Independent	<i>3</i>	Minus	<i>--- 5</i>	<i>=</i>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

SMALL ENTITY TYPE OR OTHER THAN SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	\$35.00	OR BASIC FEE	\$70.00
X\$ 9=		OR X\$18=	
X40=		OR X80=	<i>160</i>
+135=		OR +270=	<i>270</i>
TOTAL		OR TOTAL	<i>110</i>

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL ADDT. FEE		OR TOTAL ADDT. FEE	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL ADDT. FEE		OR TOTAL ADDT. FEE	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	<i>0</i>
X40=		OR X80=	<i>0</i>
+135=		OR +270=	<i>0</i>
TOTAL ADDT. FEE		OR TOTAL ADDT. FEE	<i>0</i>

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			---	=
Total	<i>12</i>	Minus	<i>-- 20</i>	<i>=</i>
Independent	<i>3</i>	Minus	<i>--- 5</i>	<i>=</i>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

9-12-05 (Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			---	=
Total	<i>18</i>	Minus	<i>-- 20</i>	<i>= 0</i>
Independent	<i>3</i>	Minus	<i>--- 5</i>	<i>= 0</i>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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